

REGISTRATION FORM - COMPANY

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Bity SA
Rue des Usines, 44
2000 Neuchâtel
Suisse

1. IDENTITY DETAILS

*Company name

*Business registration certificate number:

Please provide an extract from the Commercial Register

*Date of founding (DD/MM/YYYY)

2. ADDRESS OF THE HEAD OFFICE

PLEASE PROVIDE AN OFFICE RENTAL AGREEMENT OR A RECENT (WITHIN THE LAST THREE MONTHS) UTILITY BILL OR BANK STATEMENT.

*City *Country

*State *Postal

Mobile Tel.(office)

*Tel. Fax

*email

3. ADDRESS OF THE BUSINESS INVOLVED

Please tick if same as address of the Head Office

*City *Country

*State *Postal

Mobile Tel.(office)

*Tel. Fax

*email

This information is the sole property of Bity SA and would not be disclosed to anyone unless required by law or except with the express permission of the Client

4. COMPANY INFORMATION

* **Number of employees :**

1 - 10 11 - 29 30 - 49 50 - 99 100 - 199 200+

***Business activity** (please describe your typical customers and services/goods you provide) :

***Annual net profit for the last financial (fiscal) year (in CHF) :**

< 10.000 50.001 - 100.000 200.001 - 500.000 1.000.001 - 5.000.000
 10.001 - 50.000 100.001 - 200.000 500.001 - 1.000.000 > 5.000.000

***Source of company's funds :**

Investments Loans or bank credits Owners' capital Profits or interest

***If you have other sources, please describe :**

* **Expected trading volume per year in CHF :** _____

5. AUTHORISED SIGNATORIES

PLEASE PROVIDE A COPY OF A VALID ID, A PROOF OF RESIDENCE (UTILITY BILL OR BANK STATEMENT) AND A RECENT PHOTOGRAPHY FOR INDIVIDUAL WHO SIGNS THE FORM

FULL NAME	POLITICALLY EXPOSED PERSON	RESIDENTIAL ADDRESS	RELATIONSHIP WITH APPLICANT
	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		

6. CONTRACTING PARTY CONTROLLING INTEREST IDENTIFICATION SHEET

*The contracting partner hereby declares that (tick the appropriate box)

The person(s) listed below is/are **holding 25% or more of the contracting partner's shares (capital shares or voting rights)**. In case of the person being a legal entity (excluding a natural person), please add below the name of individual person(s) who has/have the majority shares of this legal entity (capital shares or voting rights).

or

If the capital shares or voting rights cannot be determined or in case there are no capital shares or voting rights of 25% or more, the contracting partner hereby declares that the person(s) listed below **is/are controlling the contracting partner in other ways**.

or

In case this/these person(s) cannot be determined or this/these person(s) does/do not exist, the contracting partner hereby declares that the person(s) listed below is/are the managing director(s).

FULL NAME / COMPANY NAME	RESIDENTIAL ADDRESS	NATIONALITY

7. ANY OTHER RELEVANT INFORMATION

8. DECLARATION

The client declares that the details furnished above are true and correct to the best of his knowledge and belief and he undertake to inform Bity of any changes therein, immediately. The Client is informed that if false information is intentionally produced within this form, it constitutes a forgery as stated in Art. 251 of the Swiss Criminal Code.

*Name of the client: _____

*Signature of the authorised signatory

*Date (DD/MM/YYYY)

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